



State of Utah
Department of Workforce Services
REGISTRATION FOR SERVICES

Please answer the questions below to register for employment, training and/or supportive services offered by the Department of Workforce Services. An application form may be required depending on the services you request.

For Office Use Only

Employment Center: _____

Completed by: _____

A. General Information

Social Security Number: _____ - _____ - _____ Today's Date: _____

First Name: _____ M.I.: _____ Last Name: _____

Mailing Address: _____ Apt. # _____ City: _____ State: _____ Zip: _____

Street Address: _____ Apt. # _____ City: _____ State: _____ Zip: _____

Email Address: _____

Home Phone: _____ - _____ Cell: _____ - _____ Work: _____ - _____ Other: _____ - _____

1. **Date of Birth:** _____ / _____ / _____ 2. **Gender:** (1) Male (2) Female

3. **US Citizen?** (1) Yes (2) No If No, your alien registration number: _____

4. **Are you a refugee?** (1) Yes (2) No If Yes, enter your date of entry: _____ / _____ / _____

5. **Are you an asylee?** (1) Yes (2) No If Yes, enter date asylum was granted: _____ / _____ / _____

6. **Ethnicity:** Are you Hispanic or Latino? (1) Yes (2) No

7. **Race:** You may select one or more:

- (1) American Indian or Alaska (N)ative (South/Central/North American Native)
- (2) (A)sian
- (3) (B)lack or African American
- (4) Native Hawaiian or other (P)acific Islander
- (5) (W)hite (Including origins from Europe, Middle East or North Africa)

B. Military Service: Complete this section if you are a Veteran.

8. Choose those items that best describe your veteran status:

Service connected disability, 30% or more.

Service connected disability, less than 30%.

Active military service (over 180 days at one time)

Your husband\wife has total permanent service connected disability, is a prisoner of war, is missing in action, or died as a result of a service connected disability.

Member of a Reserve or National Guard component who served on active duty during a period of war (includes Persian Gulf War) or in a campaign for which a campaign badge was issued.

Served on active duty in the US armed forces during a war or in a campaign or expedition for which a campaign badge has been authorized.

Military Service Dates

Mo. Yr.

From: _____ / _____

To: _____ / _____

From: _____ / _____

To: _____ / _____

From: _____ / _____

To: _____ / _____

C. Migrant Seasonal Farm Worker: For Office Use Only

Select only one:

(1) Seasonal Farm Worker (2) Migrant Food Processor (3) Migrant Agricultural Worker

D. Desired Employment

Your Objective Statement is the description of the type of employment you are seeking. This statement will become part of your electronic DWS resume.

9. Objective Statement _____

10. Can employers view your resume via the DWS web site? (1) Yes (2) No

11. Currently employed? (1) Yes (2) No

Job (s) you are interested in:	Occupational Code	Months of Experience	Year Last Worked
Registers Requested: 1. _____ 2. _____ 3. _____ 4. _____			

12. Minimum salary you will accept per: (1) Hour (2) Month (3) Year Amount \$ _____

13. Are you willing to work on a commission basis or piecework basis? (1) Yes (2) No

14. A. Available to work: (1) Full-Time (2) Part-time (3) Temporary (90 days or less) (4) Seasonal

B. Shifts you are willing to work: (1) Day (2) Swing (3) Graveyard (4) Rotating

C. Available to work on Saturday? (1) Yes (2) No **D. On Sunday?** (1) Yes (2) No

15. Willing to live at the work site? (1) Yes (2) No

16. Willing to work domestic jobs? (1) Yes (2) No

17. Maximum pounds you can lift on a regular basis: (1) Light to 20 lbs. (2) Medium to 50 lbs.
 (3) Heavy to 75 lbs. (4) Very Heavy over 75 lbs.

18. Do you have access to a car? (1) Yes (2) No

19. A. Regular driver's license? (1) Yes (2) No

B. Commercial driver's license (CDL)? (1) Yes (2) No

C. Commercial Class: (1) A (2) B (3) C

D. Endorsements: _____

E. Employment History

20. List your work experience, starting with your current or most recent job. Leave ending date blank if still employed.

Employer Name: _____ City: _____ State: _____

Start Date: ___ / ___ / ___ Ending Date: ___ / ___ / ___ Total number of months worked: _____ Hours per week: _____

Ending salary per: (1) Hour (2) Month (3) Year Amount \$ _____

Print on Resume for Employers to View. (1) Yes (2) No

Job title _____

Job description/duties (Include skills obtained, and tools/machines used): _____

Employer Name: _____ City: _____ State: _____

Start Date: ___ / ___ / ___ Ending Date: ___ / ___ / ___ Total number of months worked: _____ Hours per week: _____

Ending salary per: (1) Hour (2) Month (3) Year Amount \$ _____

Print on Resume for Employers to View? (1) Yes (2) No

Job title _____

Job description/duties (Include skills obtained, and tools/machines used): _____

Employer Name: _____ City: _____ State: _____

Start Date: ___ / ___ / ___ Ending Date: ___ / ___ / ___ Total number of months worked: _____ Hours per week: _____

Ending salary per: (1) Hour (2) Month (3) Year Amount \$ _____

Print on Resume for Employers to View? (1) Yes (2) No

Job title _____

Job description/duties (Include skills obtained, and tools/machines used): _____

F. Education / Licenses / Certificates / Accomplishments

21. Are you a full time student attending or planning to attend school within four months?
 (1) Yes (2) No

22. Please indicate the number of years of schooling you have completed: _____

23. Degrees:

(1) None (2) H.S. (3) GED (4) Associates (9) Juris Doctorate
 (5) Bachelors (6) Masters (7) Ph. D (8) Area of Study

School Name: _____ **City:** _____ **State:** _____ **Country:** _____

Major code: _____ **Minor code:** _____ **Completion date:** _____ / _____

(1) None (2) H.S. (3) GED (4) Associates (9) Juris Doctorate
 (5) Bachelors (6) Masters (7) Ph. D (8) Area of Study

School Name: _____ **City:** _____ **State:** _____ **Country:** _____

Major code: _____ **Minor code:** _____ **Completion date:** _____ / _____

(1) None (2) H.S. (3) GED (4) Associates (9) Juris Doctorate
 (5) Bachelors (6) Masters (7) Ph. D (8) Area of Study

School Name: _____ **City:** _____ **State:** _____ **Country:** _____

Major code: _____ **Minor code:** _____ **Completion date:** _____ / _____

(1) Certificate		(2) Professional License	
Type:	_____	State:	_____
Date received:		_____ / _____	
(1) Certificate		(2) Professional License	
Type:	_____	State:	_____
Date received:		_____ / _____	
(1) Certificate		(2) Professional License	
Type:	_____	State:	_____
Date received:		_____ / _____	

24. Additional Educational Accomplishments:

School Name:	_____		
Type of Education:	_____	State:	_____
Date received:		_____ / _____	

25. Accomplishments (List up to Ten):

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

G. Eligibility for Other DWS Services

The Department of Workforce Services offers a variety of services to special customer groups. If you are interested in exploring these possible resources, please complete the following questions. You may need to complete an application for additional services and provide additional information. If the service you need is not offered by Workforce Services, we will provide you with information on other resources.

- 26. **A.** Are you disabled?..... (1) Yes (2) No
- B.** If yes, do you consider it a barrier to employment?..... (1) Yes (2) No
- 27. If unemployed, is your unemployment the result of a layoff of 15 or more employees?
..... (1) Yes (2) No
- 28. **A.** Are you a homemaker who has been out of the workforce for eight or more years?
..... (1) Yes (2) No
- B.** Have you lost the income of a family member or government program which you were previously dependent on?..... (1) Yes (2) No
- C.** Do you feel you lack the skills necessary to find employment?..... (1) Yes (2) No

LEP (Limited English Proficiency)? _____

H. ADDITIONAL COMMENTS:

Please explain what your career/employment goals area and describe any problems you see to reaching these goals.

Equal Opportunity Employer Program

Auxiliary aids and services are available upon request to individuals with disabilities by calling (801) 526-9240. Individuals with speech and/or hearing impairments may call Relay Utah by dialing 711. Spanish Relay Utah: 1-888-346-3162

Please turn over and complete Page 6

USE OF INFORMATION SUBMITTED: *The Workforce Services Act and the Government Records Access Management Act require us to notify you that any information you are requested to give when filling out a "Registration for Services" from Workforce Services is voluntary, unless you are currently filing for unemployment insurance benefits, in which case the information (except the disability data) is required. Failure to complete all documents accurately and completely may result in loss or reduction of service and, if you are a claimant, may result in denial of unemployment benefits or possible criminal prosecution for false statements. This information may be used for any purpose related to the administration of Workforce Services programs/services, and related state and federal laws, including but not limited to employment services, statistical data, payment of benefits, law enforcement, audits, etc. This information may also be disclosed to employers (information about the receipt of Supportive Services cannot be shared with employers), the Federal Government, the Dept. of Human Services, Immigration Naturalization Services, the Federal Dept. of Housing and Urban Development, and the Department of Health.*

Department of Workforce Services programs are all equal opportunity programs. If you believe you have been discriminated against because of race, color, national origin, age, sex, disability, political beliefs, or religion you can call Customer Relations at 1-800-331-4341 for information on how to make a claim.

Skills / Tools

Please circle up to 20 Matching Tools and Skills

The following is a list of skills and tools for matching specialized job qualifications requested by employers. Selected skills and tools will also be displayed on the online resume.

Construction / Industrial		Tools Owned		Computer Software	
BACKH	Backhoe / Trackhoe	AUTOT	Auto Body Tools	DBASE	DBASE
BLUEP	Blueprint Reading	CARPH	Carpentry Hand Tools	EXCEL	EXCEL
BULLD	Bulldozer / Grader	CEMET	Cement Tools	LINUX	LINUX
CABIN	Cabinetry	DRYWT	Drywall Tools	LOTUS	Lotus / Lotus Notes
CARPT	Carpentry	ELECT	Electrical Tools	MICRW	Microsoft Word
CEMEN	Cement	HARDH	Hard Hat	PEACH	Peachtree
CRANE	Crane Operator	MACHT	Machining Tools	POWER	Power Point
DRYWL	Drywall	MECHA	Mechanic Tools	PRESE	Presentations
ELECC	Electrical	OWNTR	Own Truck	PRINT	Print Shop
FORK	Forklift	PAINT	Painting Tools	QUATT	Quattro-Pro
MACHN	Machining	PLUMT	Plumber Tools	QUICB	Quick Book for Windows
MININ	Mining	SHEET	Sheet Metal Tools	UNIX	UNIX
PLC	Program Logic Control	STEEL	Steel-toed Boots	WIND	Windows
SOLDE	Solder - Hand	WELDT	Welding Tools		
General		Admin Support / Office		Programming Tools	
COMPK	Computer Literate	BANKI	Banking	ACCES	Access
INTER	Internet Knowledgeable	BOOK	Bookkeeping/Accounting	COBOL	COBOL
INDTRU	Industrial Truck Driver	COLLE	Collections	CPP	C++
INTST	Interstate Truck Driver	DATAE	Data Entry	DELPH	DELPHI
LOCAL	Local Truck Driver	GENOFF	General Office	DREAM	Dream Weaver
SALE	Sales	HRES	Human Resources	FLASH	Flash
TECHWR	Technical Writing	INSUR	Insurance	FRONT	Front Page
TELE	Telemarketing	MEDIT	Medical Terminology	HTML	HTML
WARE	Warehouse / Production	LEGAL	Legal Terminology	JAVA	Java
		TENKE	Ten Key	ORACD	Oracle Database
		QUART	Quarterly Taxes	VISUA	Visual Basic
				XML	XML
Service Industry					
CASH	Cashier	Welding			
CAHDLG	Cash Handling	ALUMI	Aluminum Welding		
CHILD	Child Care	MIG	MIG Welding	Languages	
CONMGT	Conflict Management	PIPE	Pipe Welding	BILIS	Bilingual Spanish
CUSTSV	Customer Service	STAIN	Stainless Steel Welding	BILO	Bilingual Other
FOODP	Food Preparation	STRUS	Structural Steel Welding	SIGNL	Sign Language
FOODSV	Food Service				
JANIT	Janitorial / Cleaning				
RETSLS	Retail Sales				

NOTE: This list is not a reflection of all skills and tools, please be sure to include other skills you may have in your work history and accomplishments.